



WYE LINE

Arlington Fire Department Newsletter

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The Chief's Message

Truth, Trust, and Transparency

As our Department moves forward into the future, we must carefully and honestly evaluate our missions, services, delivery methods and even our personal motivations in order to keep our organization strong and vibrant. We will continue to work towards meeting the expectations and needs of those we serve in effective and efficient ways. Our citizens' need for safety is the very reason that we exist. They will always come first. That's why we're "public servants."

We must remember it's our service capabilities that keep us as a relevant and viable organization to citizens we serve. Some may feel that we're here for only one or two reasons. I occasionally hear the words – "I hired here to be just a firefighter." Well ok, but being a firefighter is more than someone who just fights fires or responds to EMS calls. A firefighter is someone who helps others regardless of the issue, who develops solutions to problems, who steps up and serves others in need. There is great honor in serving others. "Self defining" statements like "I'm just a firefighter" minimizes what our organization is about and reinforces some negative fire service stereotypes.

Our profession is built on the public's trust. The public believes that we can help in any situation. They're right; we can. They believe us to be honest, trustworthy and dependable (not self serving.) They know us to be compassionate and selfless responders (not calculating or disconnected from those we serve.) They know we can get to the right answer or outcome because we're dedicated professionals. They know that when a problem occurs (not just fires or EMS) they can call on us because we're prepared and focused on helping others. There's nothing "beneath us" or too complicated, or outside of our abilities. Citizens know we're a competent, solution-oriented team and they know we will do all we can to act in their interest.

Trust - the assured reliance on the character, ability, strength, or truth of someone or something

As members of the Arlington Fire Department, we must continually work to maintain the trust of the citizens we serve and with one another. Trust is not about telling someone what they want to hear or just a "story." It's about telling the honest truth. Successful and flourishing relationships are built on truth which in turn instills trust among stakeholders. We can damage important relationships when we delete truth from our words and actions. The absence of truth or its manipulation, can have lasting negative impacts on our team, both directly and indirectly. We have to do what we can to keep truth centered in our organizational culture and service missions. While our team can have differing perspectives on issues, the truth should never become a casualty in the dialogue between stakeholders.

A leader's first obligation to the team is the truth. The reality of the truth is that it can be both good and bad. But good or bad, the truth must be shared with the team if there is to be trust. Truth is the basis for trust. And trust is the basis for credibility. To be a credible leader, one must be trusted to convey the truth. This means sharing the truth in an honest and transparent way. As your leader, I'm responsible for maintaining leadership team credibility, trust, and of course the truth. In fact, all members of the Arlington Fire Department are responsible for the truth. Together we should confront rumors or other forms of misinformation with the truth, to ensure understanding and respect for all members of our Department. Remember we will do the "right things right" every time because it's what the Arlington Fire Department is about and it's who we are.

My door is open to any team member with concerns about issues impacting our organization. The leadership team of the Arlington Fire Department will continue to be diligent in conveying truthful information in a transparent way.

STAY SAFE!



Straight From The Chief



Chief Brian Riley is Colleyville's next Fire Chief!

After a very competitive Fire Chief search and interview process, Chief Brian Riley was identified as the number one candidate for the position of Colleyville Fire Chief. Chief Riley accepted the position offer and will begin his new duties as Fire Chief of Colleyville on September 3, 2013.

Please join me in congratulating Chief Riley.

Chief Riley has officially submitted a letter regarding his pending retirement from the City of Arlington - effective **August 16, 2013**. We will be providing details on a celebration gathering to recognize Chief Riley's long-standing organizational contributions and leadership successes in the Arlington Fire Department. We wish Brian and his family well on this new exciting opportunity.

Memorial Day



Volunteers who placed over 6000 flags on the graves of Veterans at Moore Memorial Gardens on Saturday, May 25, 2013.

Commitment and Dedication *By Don Coker, AFD Chaplain*

Commitment and dedication are two of the most powerful, essential and influential words in any organization and in life itself. To be committed and dedicated is to have a set of values, a set of goals, a vision of the accomplishment and method or plan to achieve the desired results. As long as I have been a part of the Arlington Fire Department, it has demonstrated the highest degree of commitment and dedication; and as a result we have become a leader in our profession. This did not happen overnight and it involved a great number of dedicated people over the years.

The Arlington Fire Department has had 16 Fire Chiefs since 1901. During the tenure of the last four Chiefs we have seen the greatest amount accomplished that has put us in this leadership role. There are several reasons this happened. The first big thing to happen was the tremendous growth in population that began in the 1960's and has continued up to the present. In fact, for more than two decades, Arlington was one of the fastest growing cities in America. The next important thing we experienced was a growth in modern fire fighting education and leadership that was willing to develop and implement new tactics and techniques. There was also an increase in the development of new and improved recourses. During the 1980's we began our first responder system, which elevated our image in the eyes of citizens of Arlington and our city leaders. The growth of our city brought on a growth in the size of our fire department. During the 1980's and into the 1990's we hired over half of our Department's membership. The quality of people that were hired and trained during this time has made a large impact in what we are today. The last thing that I think helped us accomplish so much is the positive commitment and dedication that outweighed any negative commitment and dedication that would surface. This is because this Department has quality members that can see through selfish agendas that tear down the character and integrity of this organization.

During each of the last four Chiefs' eras, there has been a commitment and dedication to improve and be better than what we were. Each era has been able to do this mainly because of the positive contributions they inherited.

I would like to share a message that was written in our last commemorative book that well states who we are.

"Our goal is to position the AFD as the preeminent Fire Department in the region through providing state of the art services by highly-trained professionals in all areas of emergency response. We're an open, inclusive and caring team, where our members share a bond of duty, honor and loyalty with one another and with the community. Together the members of the Arlington Fire Department represent a positive and opportunistic organization focused on making a notable difference in the community we serve."

***Prepared For Duty
Serving with Honor
Responding with compassion
Committed to Professional excellence***

In the Arlington Fire Department, we embrace both community and business partnerships and are constantly working to improve the services we provide through innovation and through process review. The AFD provides the following services:

- Fire Suppression/Rescue
- Advanced Life Support- Emergency Medical Services
- Vehicle Extrication
- Hazardous Materials Response
- High Angle Rescue
- Confined Space Rescue
- Trench Rescue
- Dive/Swift Water Rescue
- EMS System Oversight and Administration
- Explosive Ordnance Disposal (EOD)
- Large-Scale Emergency Management
- 911/Public Safety Dispatching
- Life Safety Inspections
- Plans Review
- Community Service
- Public Education
- Public Safety Special Events Services
- Homeland Security Grant Management

This year we have lost a large number of fire fighters in Texas and Arizona. This has been a

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tragic year and it is only July. Our prayers go out to the communities, departments and loved ones who have suffered so much loss. May these tragedies remind us of how important it is for each of us to stay focused on our commitment and dedication and to keep the skills and knowledge of our profession sharp.

In closing I want to share with you a poem written by a nephew of mine, Charlie Coker. He is a retired high school football coach in Florida. He wrote this one year after he attended a coaching seminar.

"Believe and Commit!"

A clear and collective vision, a unified team,
A role for everyone, who dares to dream,
Be firm, be confident, consistent, and fit,
Have one standard. "Believe and Commit!"

Know who you are, there is but one way,
So say what you mean & mean what you say!
Respect one another; be humble, yet proud.
The option to fail is never allowed.

With hard work, enthusiasm, a desire to learn,
The right to excel is what you will earn.
Make no excuses, be tough, and play smart,
Prepare to win, then play with your heart!

May God Bless you!

AISD Students

By LT Rob Constantine

Over the last two years Arlington Fire Department (AFD), Arlington Independent School District (AISD) and Tarrant County College (TCC) have joined to develop a high school fire academy program. We graduated our first class last month and students are already applying for jobs in the area. This is the first college program the AISD has been a part of. We have added three additional classes to the fire academy program to include medical terminology, A&P, and pharmacology. This program will offer over 24 credit hours. Due to 75% of our students passing the state fire exam and 15 out of 16 students being eligible to sit for the National Registry EMT test our program has had a big impact on the AISD. Before our program, the district and college have joined for just academic dual credit classes such as English and History. Over the next year and a half, the district will roll out 20 new dual credit programs that will affect over 600 students a year. These programs include HVAC, (AWS) Welding, Automotive Engine Analysis, Game & Simulation, Accounting, Business, Automotive Metal Refinishing, Culinary, Computer Maintenance, and Computer Aided Drafting and Design (CADD). Students that make it into these programs will be trained throughout high school and be certified with college credit and, in some cases, job placement right out of school. AISD credits our program for these new opportunities for a large number of students. Before our fire academy, high school students were not proven to be successful in a technical dual credit college program setting. The AISD has modeled their new programs after the Fire

Academy and how we operate. This is a credit to the instructors and our organization as a whole for the way we have conducted business for over 60 years. Say what you want about this program, good or bad, at the end of the day this program will have an everlasting positive impact on the AISD and the future of this community we have chosen to serve.

1st Graduating Class



From Medical Operations

Medical Operations, Reaching Beyond Arlington *David Stapp, Battalion Chief Medical Operations*

Approximately five years ago, Lisa Bennett (QA/QI Coordinator) received an invitation to join the Emergency Pediatric Care (EPC) Committee based on her distinguished expertise in managing pediatric emergencies. The EPC is a National Association of Emergency Medical Technicians (NAEMT) sponsored committee. As an EPC committee member, Lisa participates in research, development and implementation of pediatric education for pre-hospital providers both domestic and abroad. This voluntary position has allowed her to teach at various locations across the country, and the last several years at the EMS World EXPO. Recently, the Pre-hospital III Latin American Congress requested that the NAEMT bring the EPC course to South America. In April 2013, Lisa and two other committee members traveled to Lima, Peru to present the EPC course to a large group of emergency physicians from across South America. These physicians will, in turn, present the course to providers in their regions/countries.

For more information on the NAEMT, EPC, visit <http://www.naemt.org/education/epc/EPCCommittee.aspx>

In May, Gene Bates (EMS Clinical Coordinator) and Lisa presented our AEMSS CPR survival success story to providers from throughout the region at the CareFlite EMS conference. In June, Lisa made a similar presentation at Methodist Dallas Hospital specifically for Dallas County EMS providers. The American Heart Association has also reached out to us to find out specifically what we are doing that is saving so many lives. The "Arlington Way" works and the word is spreading about our success in saving the lives of cardiac arrest patients!

For the period June 1, 2011-April 30, 2013, **62 people suffering sudden cardiac arrest have survived in Arlington** (Includes Utstein and Non Utstein criteria). Our current cumulative "save rate" stands at **49.1%**! Our continued success depends on the performance of our Dispatch team and the AEMSS members...keep up the outstanding work!

DID I DO THAT?? *By Lisa Bennett, QA/QI Coordinator*

What is the one thing you like least about your job as an emergency provider? If you asked most people, they would tell you, "I hate to do paperwork" or "if I could just do what I was trained to do instead of paperwork, I would love my job". However, we have learned to accept this task as part of our job responsibilities. Clearly understanding why documentation is vastly important in our careers as emergency providers assists us in "making the most" of what can feel like is a never ending and daunting task. I would wager each of you learned in EMT-I/Paramedic school, "if it is not documented, it didn't happen." Sadly, that truth has not changed in all my years in EMS. Nevertheless, there are so many other reasons that we document what we do. In this time of electronic tracking and documentation, proper recording of the events we encounter allow us an opportunity to focus our energy on the areas needing improvement as well as areas where we excel.

"Why do we have to document what happened on scene if AMR is going to do it anyway"? The straight answer... **documenting your actions is a requirement of the Texas Department of State Health Services (DSHS)**. The state requires each entity /organization to record all actions and/or inactions performed on the scene of an emergency incident. While AFD and AMR operate as a "system" utilizing the same protocols, each entity is required to document their actions to the State. This required documentation IS reviewed by state representatives during audits, inquiries, and investigations. During the application process for the First Responder certification, the City of Arlington must provide proof of a mechanism for recording all patient encounters and a method for tracking skills for recertification. The method Arlington

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Fire Department utilizes is patient care records in our record management system, FireHouse.

"What about if what I document is different from what AMR documents; won't that look bad"? First, if you think about it, why would what you see and hear be so vastly different from what AMR personnel would see or hear? That is not to say that perceptions are not different. However, each person certified by the state to function as a medical provider had to prove proficiency in patient assessment and skills prior to receiving their certification. The actions taken should not be vastly different in the documentation. Although the AMR Paramedic may have a more in-depth patient interview or decide on a different treatment path, the actions on scene taken by members of each organization should be clear to all. If in doubt, differentiate in your narrative the actions of AFD and AMR to paint a clear picture of your actions. Additionally, as you document what you see / hear and the actions taken, it should be clear to the individual reading the report exactly what happened in the presence of AFD personnel. In other words, your report should paint an indisputable "picture" about what occurred from the report author's perspective.

"It is not necessary to document what AMR did or said." Although it is not required to document the actions or reasons of what occurred with AMR personnel, it certainly assists the reader of the report in understanding why actions were or were not taken. For example, if AMR checks breath sounds on a patient complaining of breathing difficulty, it is not necessary for AFD to document what AMR heard. However, that information becomes very important if the Paramedic asks AFD personnel to administer medications based on what the AMR Paramedic heard. The AFD report should paint a clear picture that they administered the medication at the direction of the AMR Paramedic, which explains why breath sounds were not documented by AFD.

"I have never written an EMS report before or I don't write enough reports to feel comfortable." Look to other crewmembers or your officer to assist you with your reports. I guarantee you they have written their fair share of patient care reports. Additionally, there are sample reports developed on frequent incident types of EMS patients found at: **X:\Shared\EMS**

Folder\FireHouse. These provide a template for you to know what should be included in the report and where to put the information.

It is often said, "Documentation will help you recall the events in court, but fire departments are never called to court regarding their patient care." Although First Responders tend to be fairly well protected against lawsuits, the reason for being called to court to testify may not be about actions taken by the First Responder, but often to prove or disprove situations that occurred in the presence of emergency responders.

"If my report is generic and vague, I will never be called to court". **I cannot tell you how incorrect that statement is.** If you have never had to testify in court, I sincerely hope you never have to. However, if you ask any attorney, a vague report opens numerous doors of opportunity during a case. **In most cases when an emergency provider is called to testify, it is the intent of the defense attorney to show that the memory, knowledge and ability of the person testifying are inept and questionable.** Nothing is more humiliating than being discredited in a court of law. That is the job of the attorney. If you misspell words, document conflicting information, or are vague in the description of the incidents that occur, the attorneys can and will discredit you as a useful witness. That does not mean you get out of sitting for hours to give a deposition or to testify. It only means you wait for hours or days, to provide your testimony; make it worth your time! Your best "defense" is a well-written patient report.

"If I deem this individual as a "no patient," medical assist or good intent, I won't have to complete a patient report." Another reason for appropriate documentation of events on scene is to account for whom and what we encountered on scene. Often times we will encounter situations in which an individual does not meet the definition of a patient, however, their name and demographic information **MUST** be entered in the "Persons/Entities" involved under the "Property and Involvement" tab. **This is a NFIRS requirement and therefore an AFD policy.** Recording this information is purely for accountability purposes. This allows us to track those we encountered on an EMS incident and why they were deemed not to be a patient. This process allows us to search this information by date and name should

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there ever be a request for records. We certainly do not want to be in a position that someone claims we came out to their incident and spoke to them and we have to tell them we have no record of their involvement. Failure to supply persons involved information for everyone involved in the incident leaves YOU and the City open for a claim that they were sick or injured and no one ever checked on them. **Accounting for and documenting all individuals involved in the incident is CRITICAL, even if they are a non-patient.**

Documenting what we do each day during our shift is a time consuming and daunting task when you are overwhelmed with other duties throughout the day but it is a necessary task to be completed accurately and in a timely fashion. Medical Operations is continually looking for ways to make this task simpler and less time consuming while retaining the accuracy that is needed. Please feel free to share with any of the members of the Medical Operations team any suggestions or questions you may have regarding documentation.

FROM THE OTHER SIDE *By Gerald Randall, Battalion Chief BIII-B*

"Engine 3, Medic 1 – Respond on channel 2, Unknown Medical Emergency, 600 W. Park Row Dr., Apartment # 999." "Dispatch from Medic 1, hold Medic 1, transporting one patient to AMH ER." Long pause then "Medic 1 to dispatch, please change our destination to MCA ER."

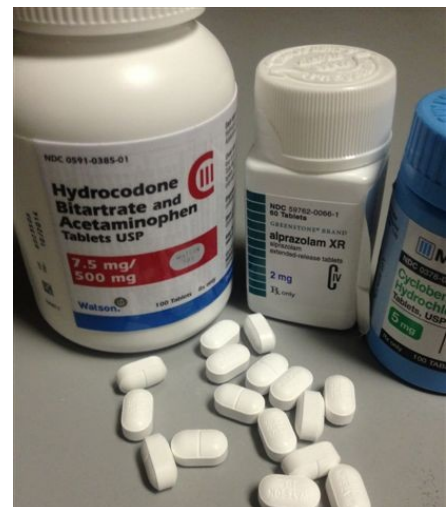
A little investigating often leads to the fact that the patient in question had already worn out their welcome at one of the facilities, but could go to the other side of town and walk out with a new prescription to "fix them." All that was missing was the ride home. On one occasion after I had transported this particular patient, I was asked if I could give them a ride back home later in the day during a return transport to the same facility. You could only guess my answer to the request.

This was an almost daily occurrence for the system in years past and many who worked part-time for the local ambulance provider or were assigned to Station #3 will probably remember the location if not the patient's actual name. These incidents were part of a

nationwide problem of patients abusing the EMS systems. The Arlington EMS System is no stranger to these events; and in recent years has taken steps to address the "Frequent Flyers" that often tax system resources, not to mention overwhelm the local ER waiting rooms with patients that are often seeking a "fix" in the form of prescription pain killers.

The abuse of "legal drugs" and the toll that it takes on society as a whole is becoming more prevalent each day. The cost to society as a whole is spiraling out of control and includes everything from lost productivity for employers to higher cost for healthcare services that are absorbed by everybody, especially those with the ability to pay. A much larger issue is the effects, both physical and psychological, that are not apparent to the average person. These include overdose leading to accidental death, how families are affected, and dealing with the physical/psychological symptoms that often occur in these situations.

The statistics are staggering. A recent study by the Centers for Disease Control found that the number of women overdosing on prescription pain killers such as Vicodin and Oxycontin has increased more than 400 percent in the past decade. About 18 women die every day from taking prescription pain killers. Since 2007, more women have died from overdosing on prescription pain killers than in motor vehicle accidents. The death rates from opioid abuse in women are more than four times higher than death by cocaine and heroin combined. In 2010, nearly a million women visited emergency rooms, many arriving by ambulance, for drug misuse or abuse. Of these, some 6,600 of them died. The rate of



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drug abuse, mostly "legal" prescriptions, has doubled from 2004 to 2010.

The abuse is not just limited to pain killers; other categories of drugs that are commonly abused are anti-anxiety medications and sedatives, such as alprazolam (Xanax) and diazepam (Valium), and hypnotics such as zolpidem (Ambien), used to treat anxiety and sleep disorders. Stimulants like methylphenidate (Ritalin), used to treat ADHD and certain sleep disorders are also widely abused.

The underlying causes for such abuses are not hard to spot with a little effort. It is also not hard to realize why women are affected at a much higher rate than men. Women, as it turns out, are more likely to seek care for issues such as unexplained pain, depression, anxiety and a whole host of other problems. Common diagnoses encountered in the field will most often be reported as Chronic Fatigue Syndrome, Fibromyalgia, Migraine Headaches, Depression, Anxiety and the list goes on and on. The effects of the medication are also more intense on the female body than that of a male, most generally due to smaller body size. Compounding the problem is a modern day society that has become all too accustomed to the concept of "Take a pill for everything that we cannot deal with and that will fix your problem" frame of mind. Further complications to solutions also lie squarely on the drug manufactures that often entice physicians to hand out prescriptions like candy to patients that really don't need them. Drug companies often will market directly to women through television and magazine advertising; this in many cases results in direct requests from patients for a specific drug to cure what they think ails them. The same study cited earlier also revealed that women are 50 % more likely to walk out of a doctor's office with a prescription for a controlled substance in hand, even if they've been given the same diagnosis as a man.

Additionally, it was revealed that the rise in deaths closely mirrors the increased prescribing of these drugs by doctors. But nearly one-third of men and women who used the drugs started taking them for nonmedical reasons. It was found that 70 percent of prescription drug abusers first got them from friends or relatives.

Recently there have been steps to bring these numbers under control. The efforts are centered on legislation at the federal level that would reclassify opioids such as Lortab, Norco and Vicodin as Schedule II drugs instead of the current Schedule III. This would greatly limit the access to them and place them in the same category as morphine. Also suggested are better tracking of prescriptions, electronic medical records and education of medical providers. Some of these initiatives are due to be implemented with the upcoming Affordable Care Act (aka, Obamacare). It is no surprise that some segments of the medical community, primarily advocacy groups, such as the American Pain Foundation and some drug manufactures, oppose such controls. They fear that patients who really need them and those patients with legitimate medical conditions will experience decreased access to such medications.

How does all this affect us, the Arlington EMS System? As pre-hospital providers, we are a vital part of the medical community and play an important part in the early care of patients; however our recognition of problems and awareness may lead to more pertinent information being passed on to hospital-based providers. Our role as history takers cannot be understated. In these situations, "being the eyes and hands of the physician prior to arrival at the emergency room" really is more than just a saying we learned in medic school.

Our encounters with prescription medication overdoses will most often involve those patients who have any number of long term diagnoses such as those listed earlier (Fibromyalgia, Rheumatoid Arthritis, Chronic Fatigue Syndrome, Migraines, etc.) or those patients that have deteriorated as a result of poor management of such medications. Occasionally, the encounters will also involve the intentional ingestion of prescription medications with the sole purpose to do harm to themselves. Treatment, in any case, is driven by the need to support basic life functions and, in some cases, the reversal of symptoms such as respiratory depression. The treatments and protocols are well laid out in Arlington EMS system protocols, overdose / poisoning, 404, issued: April 2013.

So far we have covered the abuse of prescription medications and reviewed some of the root causes

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for such. However, another result of medication abuse may also occur. Like any object that goes up then must fall back to the earth, so shall the abuser eventually have to face an inevitable occurrence. Sooner or later they will "run out" of the medication. The resulting withdrawal symptoms and behavior disturbances may range from more attempts to replenish supplies or in some cases behavior that can only be described as bizarre. The withdrawal symptoms from some medications such as Vicodin are generally not life threatening and usually begin six to 30 hours after the last use of the drug. Early symptoms may include agitation, anxiety, muscle aches, increased tearing, insomnia, runny nose and sweating. Later symptoms of Vicodin withdrawal include abdominal cramping, diarrhea, dilated pupils, goose bumps, nausea and vomiting.

The withdrawal symptoms outlined above deal mostly with the "Medical" side of the picture, but there are also a very real and devastating "Psychological" side effects, especially when dealing with some medication classes such as benzodiazepines. Xanax (alprazolam) is one of the most commonly abused prescription medications and frequently given for conditions such as anxiety/depression or panic attacks. The sudden stoppage of its use can lead to notable psychological effects, mood changes and physical symptoms. Physical symptoms of benzodiazepine withdrawal include various muscle problems from stiffness in limbs to spasms or tremors. Additional symptoms may include heart palpitations, sweating, dyspnea and lack of appetite leading to profound weight loss. Nausea, vomiting and diarrhea are also associated. While Xanax can prevent convulsions from seizure-related disorders like epilepsy, rapid withdrawal may itself cause seizures.

The psychological withdrawal effects of benzodiazepines such as Xanax can include hallucinations, depersonalization, derealization and sensory hypersensitivity. Patients may also become aggressive or irritable. Suicidal thoughts, apathy and insomnia are also possible. In some cases patients may be diagnosed with one of several psychiatric conditions such as, schizophrenia, bi-polar, paranoia or catatonia. Confinement to a psychiatric facility following medical stabilization may also result in extreme cases.

We have become adept as pre-hospital EMS providers when it comes to dealing with and caring for patients with medical and trauma conditions. However the thought of managing a psychiatric patient is a process for which many are not well prepared. Our actions must be of the type that provides a reassuring and compassionate environment for the patient and displays a genuine level of professionalism to family members of the patient. Reducing stimuli is key and may include isolating the patient from people or events that cause agitation. We must also NOT overlook possible underlying medical/trauma conditions such as hypoglycemia or head injury.

Patients who abuse or misuse prescription medications will have many similarities that are easily spotted and should be noted during pre-hospital encounters. Things to look for that responders MAY encounter are;

- Multiple medication prescriptions including opioids and benzodiazepines
- Similar or identical medication prescriptions from different doctors, i.e. "Doctor Shopping."
- Prescriptions that are not in their name.
- Prescriptions that are constantly filled several days early each month.
- Constantly losses prescriptions in order to get new or replacements prescriptions.
- Pill counts in prescription bottles that are "off" or do not match the number of days remaining on the Rx.
- Frequent trips to emergency rooms or minor emergency clinics for unexplained illnesses.
- Non-descriptive complaints of pain such as "I hurt all over" or "I have a headache".
- Complaint that their pain is unbearable or the "worst ever" (10/10 scale).
- Family members or close friends who "enable" such access to medication.
- Long term diagnosis of conditions such as Chronic Fatigue Syndrome, Fibromyalgia, Migraines, etc.

By now, many of you are probably wondering why a newly appointed Battalion Chief would choose to write an article for the Wye-Line that deals with the subject of medication abuse. My decision to move forward was made based on a real-life experience. To say

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HOT SHOTS

4th of July Parade

Members from Fire Rescue and Fire Prevention, along with City Council members, participated in Arlington 4th of July parade.



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that the experience has been life altering is an understatement, it ultimately has been far more. I have also been fortunate enough to have the support of an incredible family, a family that includes the members of this organization.

One last thing, my perception of the mental health community prior to this event was dismal at best, a viewpoint that really did not understand the extraordinary circumstances they deal with on a daily basis. This was the basis for the title "From the Other Side." I now have a very different view and a newfound respect for these Health Care Professionals.

THE TIME IS NOW By Jerry Brooks, Battalion Chief, BII-A

Recently while attending a regular leadership meeting with peers, our discussion turned to long-term planning and an ongoing legacy discussion. It was during this discussion that it became painfully obvious (maybe not so painfully to some) that considering our average age and time served, very few of us currently wearing gold would be sitting together at planning sessions in five years. A few weeks later Chief Crowson asked the group to submit ideas to him of our vision of the AFD future including both successes to build from along with challenges that we could identify both short and long term.

While writing my responses it became clear to me that along with economic challenges, demographic changes, competition among various departments etc... the future strength and success of the AFD quite simply rests within the pool of talented and dedicated personnel inheriting the reins with the changing of the guard. During this exercise I couldn't help but notice the petition list to compete in the promotional process for the ranks of Lieutenant and Captain. Using simple math, it was disappointing to me that such a small percentage of each rank had petitioned and an even smaller group had actually passed the written exam. My initial thought process had me looking at our role as leaders and the possibility that we could be missing the mark on job enrichment to entice our leaders of tomorrow to step up.

Later while conducting other business at Fire Administration, the opportunity presented in usual fashion to visit with the Chief on what I have come to call regular state of the union discussions. During this casual reflection of Department issues, the perceived lack of interest in the promotional

process came with a more in depth and analytical look. While initial data suggested a very low participation rate, the closer look revealed a young department literally in the midst of rapid turnover, resulting in lower than usual candidate eligibility numbers. This presents an anomaly that is certain to be short lived.

Though the top several positions on each eligibility list are most certainly reserved for the dedicated and well prepared, the practice of just passing a test and promoting off a nearly exhausted list is rapidly making an exit along with the "1980's employment bubble." Make no mistake; leaders come in every size and shape throughout each and every rank. The point I am attempting to make is that while rapid turnover certainly provides the energy and enthusiasm for a healthy department, time is rapidly passing on abundant annual promotional opportunities for those wishing to take the challenge of additional responsibility.

With the current tests and assessments complete we have the latest list of future leaders wrapped into an eligibility pool of four Captain and nine Lieutenant candidates, with several candidates remaining on the soon-to-expire Apparatus Operator's list. Congratulations to all; the success rate is certain to run deep on each list.

For whatever reason, those members not on a list with tremendous experience to share with the team and waiting for the perfect time to engage in the process, I suggest the time is now. Just as the large rookie schools are mirroring those of the 80's, promotional opportunity history is sure to follow with the changing of the guard.

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Time in grade requirements will provide for few additional participants to petition in the 2014 process, seemingly opening the door for those eligible and tenured members wishing to participate. That being said, the 2015 eligibility numbers will increase to a more consistent level. As an example, the 2015 Lieutenant process will result in more than 20 eligible candidates, making for an attainable yet exponentially more difficult path to success.

As the seniority bubble passes, so goes the very large promotional ceremony bubble that has become so prevalent over the last few years. The day of simply getting on a list and hoping for the best will give way to the certain and normal practice of fierce competition for limited and precious annual promotional opportunity. Fear not; the days of promoting whole or near complete promotional lists are certainly not gone forever, just likely not to reappear until the passing of the current employment bubble in 20 to 25 years.

All this being said and the point to my story is simple, there will never be a better time for our tenured members to step up to the next level and share their experience with a larger audience in this soon-to-be very young again department. The best time to start preparing for the next promotional process is usually immediately following conclusion of the present process. The time is definitely now! Be Safe!

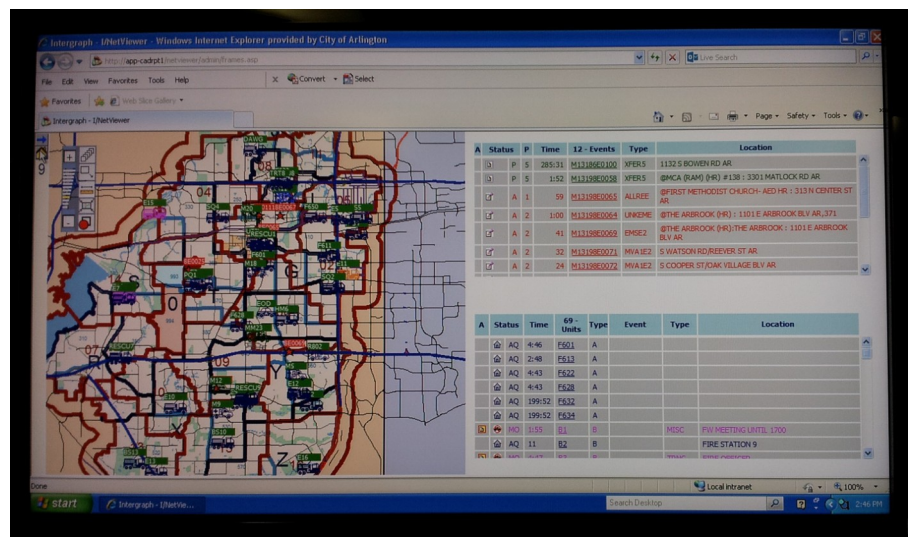
FILL THE BOOT

By AO Robert Kornegay, 05-A



2013 has been another successful year for the AFD/MDA partnership. For the past five years we have continued to increase the amount of money raised by our members for MDA's Fill the Boot. This year, thanks to everyone that participated, we raised more money than 2009, 2010, and 2011 combined. Congratulations to the crews from 9-A for collecting more than \$12,000, 7-B for collecting \$8,000 and 7-A for collecting \$6,000. Starting with 2009, we raised \$6,694, 2010, we raised \$11,395, in 2011, we raised \$45,599, then in 2012, we raised \$58,949 and in 2013, a total of **\$67,283** was raised. The continued growth shows the strength of our members' passion to help others and the strength of the partnership between APFF and Fire Administration. In 2010, the first year to collect on duty and we have become more successful every since. The final numbers for 2013, will not be reported for another six months, but in 2012 Texas lead the nation by collecting more than \$3.5 million dollars for MDA. The money raised will help over 190 kids attend MDA Summer Camp in Texas and helped to fund 19 MDA clinics in Texas. One of these clinics, Neurology Associates of Arlington, is located in our City. 2012 was a huge success for AFD and 2013 will prove to be even bigger. In 2012, AFD ranked #53 in IAFF locals nationwide in collections. Our average collection was \$203 per member giving us a higher ranking nationwide of #44. Thank you to everyone who dedicates time to collect, to Chief Crowson for allowing us to collect on duty and for everyone's help that makes this job better each day.

Video Display



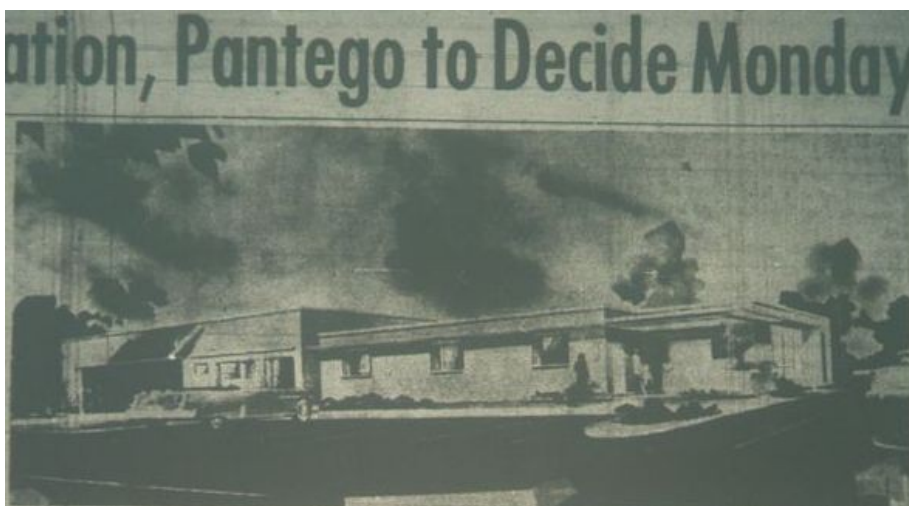
The new video display of Intergraph CAD NetViewer. See related article on Page

AFD HISTORY



Firemen Injured in Downtown Crash

Two cars driven by local firemen are shown at the intersection of Main and Center Streets in downtown Arlington Tuesday afternoon, shortly after they collided on the way to the fire hall in response to a call. The car occupied by Page Denton and Luther Starling is shown in the foreground. The second car in the background was driven by Pete Larkin. —Citizen Staff photo



Planner's Concept of New Fire-Police Station For Arlington

Work is expected to get underway in the near future on Arlington's new fire-police station at the corner of West Main and West Streets, on property recently purchased from Chester Young. The brick building, built by Young for a garage, will be renovated for use as the fire hall, while an addition will be added on the east side for a police station, housing corporation court, city jail facilities, and a City Council meeting room. The property cost the city \$40,000, and the construction work was awarded to C. R. Rigby for \$33,314.00. S. D. "Pete" Peterson drew the plans for the new structure.

Make It Happen

AFD leaders use the **10-80-10** rule

- 10%** - Give clear direction and expectation of performance
- 80%** - Give authority to complete objectives and provide encouragement
- 10%** - Follow up, verify work progress, understand completion details and provide feedback

THANK YOU..

07/01/2013

Thank you to the men who responded to the 911 call for my dad on the night of Thursday May 30th in Southwest Arlington. He is well and stable at MCA Hospital because of your compassion, care, and dedication. God bless each and everyone of you!!

07/08/13

"The Fire Department came out last month doing routine hydrant checks. My son, 7, loves men in uniforms. He came running out in his P.J.s. Your guys went out of their way to make his morning, showing him the fire hose, letting him climb in the truck. Thanks!"

07/06/13

Thanks to Arlington fire for the nice gesture. ..giving us an umbrella while raining. .. thanks very nice of you guys! Evelin Lopez

DEADLINE For Next Wye Line Articles is

**Tuesday,
October 8, 2013.**

Please send all articles and/or pictures to
debra.sulio@arlingtontx.gov.

Fire Shots



Mobile home fire On Tuesday, April 2, 2013, at 414 Oakwood Lane.



Members of Quint 1 crew at an extrication on Friday, May 2, 103, at 1500 Susan Drive.



Engine 12 crew at a house fire on Tuesday, July 16, 2013 on 1518 Carlsbad Drive.

AFD Recruitment *BY LT Kevin Seeton, CSO*

Our 2014 hiring process is getting close to the final stages. I feel that we have had an exceptional pool of candidates to choose from. I was very pleased to see candidates apply and take our written exam from cities throughout the United States to include California, Detroit, and we even had one from the country of Australia. We accepted the top 251 candidates from the written test. This started the complete, grueling process to becoming an Arlington firefighter. The candidates moved to the aerobic run, physical ability test, panel interview, and now to the command staff interviews that are scheduled for the week of July 22, 2013.

Total registrations: 1, 192

Number of candidates eligible for the PAT: 217

Attended the Panel Interviews: 184

Candidates scheduled for command staff interviews: 109

Aerobic Run: 226

Passed the PAT: 188

Top 10 Percent

Based on the information provided by Huguley (Assessment Sheets), the following personnel are in the Top Ten percent of the 307 personnel who participated in the 2013 annual fitness assessment:

Name	Score
Frank Berber	491
Tommy Gray	491
David Kannenberg	491
Alton Keeling	491
David Stapp	491
Steve Davis	487
Bobby Gutierrez	487
Steve Hendrix	487
David Jasper	487
Kent Lacey	487
Kevin Sieve	487
Bill Cooper	486
Jeff Durand	486
Pat Blair	483
Bryan Barber	482
Don Crowson	482
Jason Eisenhaur	482
Mike Ellestad	482
David James	482
Erik Kendel	482
Edward Montague	482
Steve Sager	482
Clint Bauman	481
James Evans	478
Chris Holland	478
David Houston	478
Brandon Lokey	478
Jon Padilla	478
Jackie Parker	478
Brandon Reynolds	478

Anniversaries

30 Years

COM MGR *Jayme Cole*

15 Years

OA *Teresa Carson*
 AO *Ronnie Wright*
 AO *Pat Blair*
 LT *Chris Balough*
 LT *Joel Jones*
 CLTK *Porsche Horton*
 FF *Todd Roper*
 FF/IT *Dale Alexander*
 LT *Jon Padilla*
 CP *Mike Vogel*
 AO *Kevin Sieve*
 LT *Charles Campbell*
 LT *Jayson Wittmayer*
 AO *Matt Kilgore*
 AO *Kevin Gosselin*
 CP *Scott Hofstrom*
 FF *David Crow*
 LT *Cory Bearden*
 AO *Adrian Rueda*

5 Years

TELCM *Brittany Wilson*
 TELCM *Ernestine Yanez*



Communications Corner

On June 22, 2013, Police Dispatcher Jeri Lyn Nichols won first place in her class with the following lifts: Bench Press – 154lbs, Squat – 330lbs, and Dead-lift – 336lbs. She broke three state records and will be competing at the National meet on November 16 and 17 in Dallas.

Tacy Brainard and Sylvia Bowers represented Dispatch Services with their public education presentation at the ACAPP meeting on April 9, 2013.



The second week of April was National Telecommunicator Public Safety Week. We celebrated our employees each day with donations from associations, police and fire department, and local businesses. Supervisor Mark Kelley was presented with a plaque from the city manager in recognition of this week. It was a great success and enjoyed by

all. Special thanks to all of these local businesses for their donations.

Dispatch Services welcomed two new employees on April 29, 2013, Chelsea Hufham and Alicia Fortner.

Dispatch Services would like to recognize Cherie Douglas for Supervisor of the 1st Quarter. CONGRATULATIONS!



Dispatch Services would like to congratulate and thank the following employees of the month for their dedicated service.



*March Employee of the month
Angie Mack, Telecommunicator in
Police Dispatch*



*April Employee of the month
Tracy Brainard, Calltaker/
Telecommunicator*



*May Employee of the month
Darla Payrot Calltaker/Telecommunicator*

CONGRATULATIONS

Nolan Gutierrez, son of Toni (Dispatch) and FF Bobby Gutierrez (17-C), and Sheila Keeling were married on Saturday, June 22, 2013, in Wisconsin. Nolan is a May 2013 graduate of the University of St Thomas in Minnesota. He graduated with a BA in Communications Journalism/Catholic Studies and a minor in Theology.



Letters

06/04/13

Dear Chief Crowson,

Please extend my thanks to the Operations staff for their efforts on the Firefighter for a Day program. It was a rare opportunity to experience some of the training that is required of our Arlington Firefighters. The instruction and assistance for us "trainees" was first-rate. I truly appreciate the opportunity to participate in the exercise and have a new-found understanding of the expectations of our Arlington Fire Department recruits.



This experience is on the top of my list of highlights of council service.

Sincerely,
Robert Shepard
Council Member, District 6-At Large

06/05/13

Arlington Fire Department

I wanted to take this opportunity to thank your employees and retired employee for coming out in support of my son.



In August of 2010, my eight-year-old son, Marcos Franco, suffered cardiac arrest while in gym class at St. Maria Goretti Catholic School. Your fighter fighters, Captain Mike Vogel, Guy Moore and Gary

Hall were the First Responders and their rapid response and actions saved my child's life. He now lives with defibrillator/pacemaker implant and is doing well.

This week is, June 1-7, is National CPR and AED Awareness Week, and rescuers of Sudden Cardiac Arrest as well as the Survivors were asked to unite in a celebration. They were recognized last night during a Ft Worth City Council meeting.

We truly have a deep appreciation for each of these rescuers for taking time to join us for this celebration. They are our true HEROS and we will never forget what they did for our son.

Angie and Manuel Franco
Arlington Police Department

06/19/13

Rodney Smith,

I met a fabulous team of Arlington Firefighters/First Responders on Monday, June 17th on my way to the TCC Alumni & Friends Day at the Ranger Game.

Our "meeting" on Interstate-30 was not by choice but very thankful for their assistance and learned I had many guardian angles that day. They responded to a drunk driver hit & run incident with me and my teens on our way to the game. Lt. Dereta, AO Huggins and Zapata were fantastic and placed my frazzled nerves at ease! Lt. mentioned your name as she learned I worked for the NW Campus so I wanted to make the connection with you as I've since learned you have been with Arlington FD and NW for many years. She had nothing but great things to say about you.

I hope to connect with this great team (by choice!) to personally thank them for the attention they gave me and my kids. THANKFULLY, we walked away from the scene and were personally chauffeured to Home Plate at the Ballpark in Arlington to finish off the evening on a good note with a winning game!

Thank you for your service and the work you do... then and now!

Susie Olmos-Soto, M.Ed.
Director for Continuing Education Services
Tarrant County College Northwest Campus

From Station #7

Swift Water Awareness

After a several year hiatus, Arlington Fire Department Operations members will once again be provided with training in Swiftwater Awareness along with Self-Rescue skills. We have had some great events to keep us very busy the last few years, including a Super Bowl and two World Series! Unfortunately, this has left us with over half of the 300 members assigned to operations that have never had swiftwater training.

Swiftwater rescue is a subset of technical rescue dealing in whitewater river or flood conditions. Due to the added pressure of moving water, swiftwater rescue involves the use of specially trained personnel, ropes and mechanical advantage. These rescue services are provided to the citizens and visitors of Arlington by the AFD's Swiftwater Rescue/Dive Team assigned to Station #7. However, Arlington is a large city and as seen in the past, there may be several rescues being performed at the same time. If this is the case, AFD members need to be prepared for duty.

In the United States, surface water and swiftwater rescue is covered under National Fire Protection Association (NFPA) 1006 Standard for Technical Rescuer Professional Qualifications, 2008 Edition. Swiftwater Rescue is covered in Chapter 12. The current training levels are Awareness, Operations and Technician. As mentioned above, all operations members are being provided training at the Awareness level. At the awareness level, the skills emphasized are "Reach" and "Throw." These skills can make the greatest difference in the shortest amount of time for affecting a rescue. Another technique that will be taught will be "Wade." Wade is used for still water only. The most prevalent use of this technique will be in an urban flooding situation. It is important to mention that Awareness trained individuals should not enter any moving water to conduct a rescue.

Though Awareness rescuers do not plan on entering the water, we must be prepared to save ourselves if we become victims. To assist with this, we are also including self rescue skills training as part of our curriculum. The best part of this is that we get to swim in August! To facilitate this specialized training, Command Staff has approved the use of Tarrant County College's state of the art Swiftwater Rescue Simulator. Unlike previous venues that are designed to provide a safe environment while on top of the water and in a raft, TCC's simulator is specifically designed to provide a safe environment while in the water. Underwater obstructions are designed to minimize danger. Training props to simulate hazards, called "strainers," are specifically designed to provide a safe way to train for an encounter with a real strainer. Awareness-level students will not be utilizing the low head dam for in-water training. I promise that if you make an attempt at staying out of the low head, you can easily avoid it. In addition, there will be two Station #7 personnel specifically assigned to prevent AFD members from entering the low head, as well as other safeties that will be in place. Each class will start out with a safety briefing. The information provided in this briefing will provide an avenue to avoid injury. Please follow the instructions given.

To make sure you are successful in class, please make sure you complete a few items:

1. Watch the distance learning presentations (PowerPoint and Video)
2. Verify the condition of your apparatus's personal floatation devices
3. Practice your throw bag skills! (We can tell if you didn't...)
4. Bring sun screen, swim wear and old tennis/closed toe shoes.

The Swiftwater Rescue/Dive Team is committed to professional excellence not just for the team, but also for each member of the Arlington Fire Department. If you have any questions or concerns, please feel free to contact your Station #7 duty crew.

THEORY VS. REALITY *By Irish Hancock, OEM Administrator*

It seems when I hire new staff for entry level positions, they tend to be right out of college. They are usually eager, idealistic, ready to take on the world and ready to prove themselves to OEM and AFD. I get excited seeing their enthusiasm of finally being able to work in the field that they had been previously studying for several years. The only hiccup is when reality sets in during a project and they realize it is not going as they had been taught when they were in school. The next thing that occurs is that they realize "reality" is a much faster paced and stressed filled world than the sterile environment of the classroom. There are no time-outs when Command Staff, City Management, City Council or the Mayor makes a request and deadlines of projects must still be maintained no matter how your work load has increased.

I was reminded recently of an incident I had with a former employee. They "knew" how the world operated, they "knew" how things should go, they "knew" everything, just ask them. And there were many debates between them and myself on their theory versus my reality. I pointed out to them many times their theory is based on an academic who carried a clipboard around studying what we did in reality, but that same academic was only there for one incident and not around for all of the incidents to learn how you respond to differing environments and personnel. I was consistent in my explanation that our response is "situational" based on the variables and that you can not apply theory to every incident and expect the same outcome. It took two years, but this person eventually admitted that real world experience outweighs theory when it counts. I have been in AFD now for awhile and I can honestly say I am always learning about reality no matter how many natural disasters or special events we respond to. Decisions I make now in the EOC are based on situations that occurred during the previous flooding, tornado, severe weather, Super Bowl, World Series, NBA, concerts, protest, sheltering missions, etc. when the EOC was activated. I have yet to call any of my old professors back at college to ask for their opinion.

Please don't read this and think I am saying that theory is not important, it definitely is important. But the value inexperienced personnel place on theory is significantly higher than seasoned veterans. Theory

teaches you terms, definitions and processes. Theory does not teach you history, reality teaches that. My first presidentially declared emergency was the Space Shuttle Columbia disaster, which coincidentally enough was also my internship as required by my Emergency Management degree program at the University of North Texas (UNT). I was over zealous, I was excited and I was ready to do whatever it took to get a job in this profession. After the first two weeks, I had already seen everything I had learned in two years of study at UNT. I can remember sitting there thinking, "what now?" Then I really got my education over the next four months during the Columbia Recovery Operations...lessons I learned that I still use to this day in Arlington.

While reading this, you may think that what I am writing here is very obvious but you would be surprised when I go back to talk to the students at the Emergency Management program at UNT, how often they relate theoretical jargon to me as the way to get things done. I remind them that at the time the author of their textbook was at that disaster they studied, what he/she witnessed and the decisions that were made were mostly likely the right decision for the incident. But to say, "it worked once, it will work every time," is not accurate and only setting yourself up for failure if that becomes your way of thinking.

The bottom line is that theory is very important. It helps shape the decisions that many make in critical situations. But nothing will ever replace experience. I have never seen a Chief make a decision based on what he read in Chapter 8 of a textbook, but I have countless examples of the right decisions that were made due to previous events and taking into account current variables. Gut instinct is not a theory, it is years of experience that end up shaping your reality.



- Prepared For Duty
- Serving With Honor
- Responding With Compassion
- Committed to Professional Excellence

Fire Prevention

Listed below are the investigations from the Fire Prevention members from May 1 through June 30, 2013.

DATE	ADDRESS	TYPE	INVESTIGATOR	COMMENTS
April				
2	411 Oakwood #16	Other / MH	Anthony	Undetermined; fire in trailer; no electricity. Resident left after putting out candles, closed.
3	4200 S. Bowen Rd.	EOD	Niederhaus	EOD; notified by APD, closed.
5	1000 Ballpark Way	EOD	Lea, Anthony	EOD; unattended inside stadium. No K-9 alert, closed.
6	5005 Timbercreek	Apt.	Hinkle	Accidental; fire started under second floor landing. Caused by discarded smoking material, closed.
14	1205 Kiowa Dr.	Vehicle	Moseley	Undetermined; Chevy suburban fire in driveway, closed.
15	1050 Brookhollow Plaza Dr.	EOD	Niederhaus, Moseley	EOD; suspicious package call at Marriott Hotel. Nothing found, closed.
18	3811 S. Cooper St.	EOD	Lea, Niederhaus, Moseley, Hinkle	EOD; unattended backpack in food court. Package cleared after owner of backpack was found and questioned. No hazard found, closed.
19	1000 Ballpark Way	EOD	Lea, Niederhaus	EOD; unattended package. No hazard found, closed.
19	1000 Ballpark Way	EOD	Lea, Niederhaus	EOD; unattended package. No hazard found, closed.
19	1000 Ballpark Way	EOD	Lea	Unattended backpack in parking lot. Trooper claimed after area interviews.
20	3300 Pinewood	Vehicle	Moseley	Arson; stolen vehicle set on fire, closed.
20	1701 N. Hwy 77, Waxahachie	EOD	Lea, Anthony	EOD; potential pipe bomb, x-rayed and removed, closed.
20	600 W. 2nd St., Waxahachie	EOD	Lea, Anthony	EOD; unattended bag. X-Rayed and cleared, closed.
20	1600 E. Randol Mill rd	EOD	Niederhaus, Hinkle	EOD; bag found in waterway by walk path. Checked with K-9. No alert. Appears to be homeless bag, closed.
20	1000 Ballpark Way	EOD	Lea, Anthony	EOD; unattended package. No hazard found, closed.
20	1000 Ballpark Way	EOD	Lea, Anthony	EOD; unattended package. No hazard found, closed.
20	1000 Ballpark Way	EOD	Lea, Anthony	EOD; unattended package. No hazard found, closed.
20	2006 Wesley Dr.	Other	Moseley	Incendiary; juveniles setting fires in back yard, closed.
21	3004 Franciscan Dr.	EOD	Moseley	EOD; disregarded. Noise from mail room at apartment complex. Sound from alarm no hazard found, closed.
21	1000 Ballpark Way	EOD		EOD; unattended package. No hazard found, closed.
22	1519 Running Brook	Vehicle	Niederhaus	Arson; carjacking, open.
22	400 Woodcrest	Apt.	Moseley	Accidental; fire originated around HVAC unit in the attic, closed.
22	1179 W. Corporate	EOD	Niederhaus, Moseley	EOD; business called 911 with complaint of dynamite at location. Determined to be fireworks. Disregarded, closed.
27	5509 Dana Point	EOD	Niederhaus, Anthony	EOD; chemical bomb explosion, closed.
29	54 Los Robles	House	Anthony	Incendiary; 12 y/o set mattress on fire in bedroom, closed.

Fire Prevention

DATE	ADDRESS	TYPE	INVESTIGATOR	COMMENTS
May				
1	1900 Oleander Dr.	EOD	Lea, Niederhaus, Hinkle, Lopez, Patterson	EOD; suspicious device in dumpster beeping, closed.
2	6417 Alder Ct	House	Hinkle	Accidental; fire in garage due to discarded smoking material, closed.
2	Dallas - Marriott City Center	EOD	Moseley	EOD; assist USMS with K9 sweep for Deputy US Attorney General, closed.
7	1729 Chip N Dale Dr.	House	Niederhaus, Alcantar	Incendiary; fire in attic and in pantry. Vacant, closed.
9	4211 W. Sublett	Dump	Moseley	Arson; known person set dumpster on fire, closed.
11	407, 411 Quail Roost Ln.	Vehicle /EOD	Lea, Niederhaus, Moseley, Anthony	Arson/EOD; incendiary device placed next to vehicle and ignited, arrest.
11	900 E. Randol Mill Rd.	EOD	Lea, Hinkle	EOD; unattended ammo canister, closed.
14	4211 W. Sublett	Dump	Moseley	Arson; known person set dumpster on fire, closed.
16	2707 Medlin Dr.	EOD	Hinkle, Moseley	EOD; assist APD with gun search with K-9. Nothing found, closed.
18	2122 Merritt Way	EOD	Lea, Moseley, Lance	EOD; resident found small object in drainage ditch and thought it was a blasting cap. Determined to be a battery, closed.
19	3709 Little Rd.	House	Moseley	Undetermined; fire originated in laundry room, on back porch. Unknown source of ignition, closed.
19	1224 E. Lamar Blvd.	Apt.	Moseley	Accidental; occupant lit candle with burning paper. Didn't extinguish paper and caught combustibles on fire, closed.
23	6701 St.inson Dr.	Apt.	Anthony	Incendiary; juvenile set shoe on fire in breezeway citation.
24	1461 W. Green Oaks Blvd.	Vehicle	Anthony	Undetermined; engine compartment fire. Undetermined, closed.
26	5500 Kelly Elliot	EOD	Lea, Hinkle, Anthony	EOD; pipe bomb on street - PVC with end caps, closed.
27	3919 Wentworth	House	Hinkle	Accidental; fire started on back porch from discarded smoking material, closed.
28	7315 E. Commercial	Bus.	Hinkle	Accidental; vehicle fire inside of building. Battery overheated in trunk of race car, closed.
31	308 Dee Ln.	House	Hinkle	Undetermined; fire in vacant house. All utilities on. Fire started in kitchen. Unknown source, closed.
31	412 113th St.	EOD	Hinkle	EOD; assist APD. Individual was building hydrogen power supplies for use in automobiles, when a small explosion occurred. Hazard mitigated, closed.
June				
2	4103 Corey Lee Ct.	EOD	Hinkle	EOD; chemical bomb set off in street. No property damage, closed.
2	1203 Land Rush Dr.	House	Hinkle	Accidental; fatality house fire, closed.
2	7015 Raven Meadow Dr.	House	Hinkle	Arson; molotov cocktail thrown at house ignited the exterior, open.
3	1104 Georgetown St.	House	Niederhaus	Accidental; fire started in dishwasher, closed.
4	1915 Kimberly	EOD	Niederhaus, Moseley, Hinkle	EOD; assist APD with carjacking/murder, closed.

Fire Prevention

DATE	ADDRESS	TYPE	INVESTIGATOR	COMMENTS
JUNE (cont)				
5	1104 Waverly	Vehicle	Niederhaus	Dispute between two girls (17y/o)
6	4308 Murwick	House	Niederhaus	Accidental; attic fire, closed.
8	3720 Lasalle Dr.	EOD	Niederhaus	EOD; box of ammo and gun box placed in mailbox, closed.
10	4914 Little Rd.	EOD	Anthony	EOD; assist APD with K-9, closed.
12	Turtle Creek, Dallas	EOD	Lopez	EOD; K-9 sweeps for US Marshals. Supreme Court Justice, closed.
12	1509 Shamrock Blvd	Apt.	Niederhaus	Incendiary; trash can fire in mail room. Juvenile admitted, closed.
13	Turtle Creek, Dallas	EOD	Lopez	EOD; K-9 sweeps for US Marshals. Supreme Court Justice, closed.
14	1420 Woodfern	Vehicle	Niederhaus	Undetermined; boat fire, closed.
17	2431 Timberview	House	Niederhaus	Undetermined; fire started in chair. Unknown source, closed.
24	7511 Sun Grace Dr.	House	Niederhaus	Accidental; domestic. Cigarette burn to sweatshirt, closed.

K-9 Additions



INSP Roman Alcantar and his K-9 Jesse. Jesse is a two-year-old Labrador Retriever, weighing 55 lbs. When Roman and Jesse return to Arlington in August, Roman will fill the vacant Investigator/Bomb Tech position.

INSP Manny Carrillo and his K-9 Bo. Bo is a 59 lbs., and 2-year-old Labrador Retriever also. Bo and Jesse are brothers. They will not go into service until September. Bo and Jesse are both Vapor dogs. Vapor dogs are able to trace moving explosive targets through air currents. Jasper, Darin Niederhaus' K-9, is also a Vapor dog.

AFD Teams Up With Berkman

Rangers designated hitter Lance Berkman hasn't lived in the Waco area since he was about six years old, but when he heard of the devastation and heartache wrought by the fertilizer plant explosion in West, he told team officials he wanted to help.

Rangers staffers contacted West and learned that the city needed a fire truck and firefighting gear to replace what was lost in the April 17 blast that killed 15 people and injured more than 200. Berkman was on board with the idea immediately. The truck, which Arlington Fire Department Battalion Chief Bill McQuatters procured through a vendor, has Berkman's name and jersey number 27 on the door,

McQuatters said the vendor, Union Grove, Alabama based Brindle Mountain Fire Apparatus, was the same one the department used last year to help outfielder Nelson Cruz donate a fire truck and ambulance to his hometown. "It runs well. It pumps well," he said. "We got it here and polished it up. It will be a good truck for them."

The Fire Department is donating nozzles, debris hooks and an axe and at Berkman's request is looking into air packs that he would also donate.

McQuatters said it was easier to procure this truck than the highly specific one needed in Cruz's Dominican Republic hometown, where there are no fire hydrants and the roads are often unpaved. "Hopefully we can do more" of these kinds of donations, he said.

Berkman presented the refurbished white and red pumper to city officials of West Texas on Saturday, July 5, 2013, just before the Rangers vs Houston Astros game.

On The Web

Visit the Department's latest Public Safety Announcements (PSAs) on the Fire Department's websites. The announcements are in English, Spanish, and Vietnamese. Way To Go Team!

Click on the link below to go directly to the website.
<http://www.arlingtontx.gov/fire/PSAs.html>

FIRE DEPARTMENT PSAs and Safety Tips



PSA Directory

[No Excuses-Hands Only CPR](#)

[Smoke Detectors](#)

[Detector de Humo](#)

[Smoke Detector \(Vietnamese version\)](#)

[Pool Safety](#)

[Flu \(3-Cs\)](#)

[Co Detectors](#)

[Severe Weather](#)

[Texting and Driving](#)

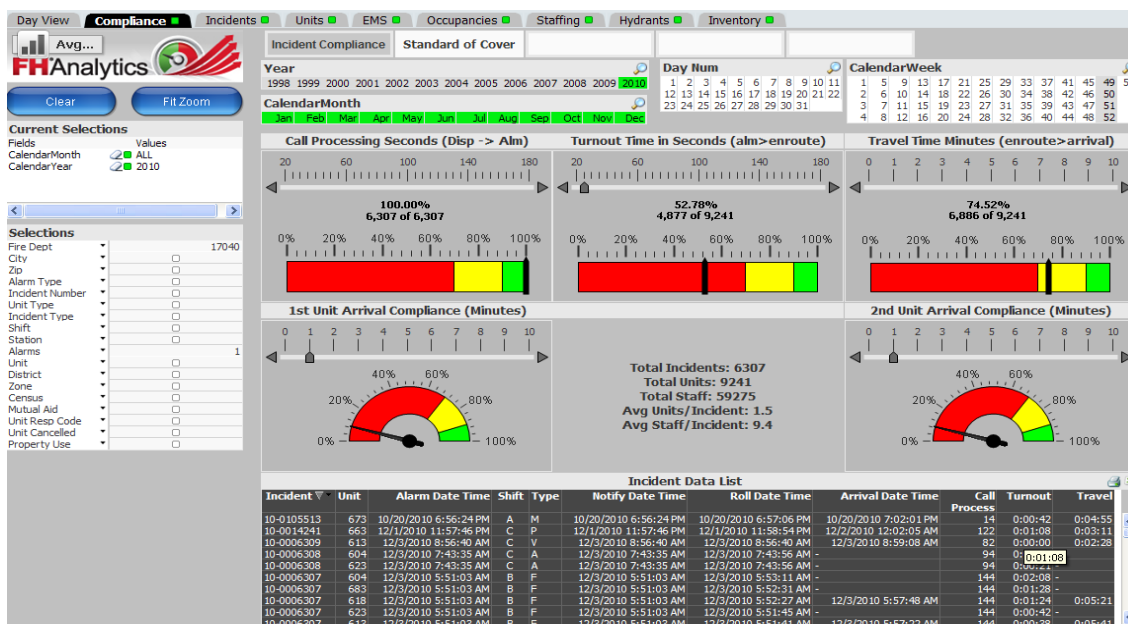


New Technologies in AFD *By David Carroll, Assistant Chief*

Hard as we try to fight it, technology has a way of sucking us into its grasp. You "twenty-somethings" out there have no idea what I am talking about, but you old fogies get it. I remember when we installed fax machines into the stations. OMG!, LOL and all those other exclamations. Then came computers in the stations, and MDTs on the apparatus. Not MDCs, but MDTs – Mobile Data Terminal. It was far from being a computer. Believe it or not, and I know I'm aging myself here, but when I was an Engineer, the department issued printed tablets that we kept by our bed and in various locations throughout the station, that we used to write down the box number, the address and the type of call when we were dispatched on an incident.

Well, things change. And over time, things change dramatically. The problem is, these days, they do not seem to change fast enough. There are so many new products and technologies out there that would solve all our problems. Right? I am sure many of you would like to see us take advantage of some of them. One of the goals I set for myself when I promoted to Assistant Chief was to "bring this department into the 21st century." I am beginning to feel that by the time we get there, it will be the 22nd century. It is important, however, that we are fiscally responsible and completely research and test any new product before we spend tax dollars on them. And technology is expensive. It involves so many facets to implement and can affect so many different aspects of not only the department, but the entire city. For example, we are currently reviewing an inventory tracking software program. The original intent was to be able to track grant funded items only. Then, the potential was recognized to track Special Operations equipment, then station equipment, then all department supplies, etc. It is a web-based program, but the Information Technology Department must be involved to ensure compliance with our system because they are the guardians of our sensitive network. The cost of the software is not very expensive (as government purchased products go), but then we have to look at labeling and tagging, scanners and readers, and all the costs associated with...well, you get my point.

On a more uplifting note, we are advancing. We continue to research and implement new technologies all the time. The new CAD system is a perfect example - definitely more 21st century-like. We will be installing a new radio system infrastructure in the near future - completely digital with regional integration and compliance. FireHouse.NET is still on the horizon. Firehouse has said that the setup for the .NET Framework platform will be web based with Cloud functionality, which will open the doors to potential new methods for data entry. We are awaiting the formal release from the vendor, which is expected within the next year. The .NET platform will offer new add-on reporting options. Of course, these add-on applications, listed below, will have to be reviewed to ensure they fulfill departmental needs before they are implemented.



FH Analytics: Per the Firehouse Software FH Analytics User's Guide (4), "FH Analytics is designed to help you understand and use powerful analysis and visualization tools with our data." The tool allows the department to customize dashboards based on compliance, or specialized views like company responses.

FH Medic: Will be released when FH.NET is released, and can operate on an iPad or tablet. FH

Medic allows field personnel to complete a patient report in the field. Per Firehouse, FH Medic will be integrated into the upcoming .NET release.

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AFD has finally ventured into the Social Media world. For those of you who haven't noticed, we have activated a Facebook Fan Page located at www.facebook.com/ArlingtonTxFire and a Twitter account at www.twitter.com/ArlingtonTxFire. The purpose of the sites is to promote the department in a positive manner and to issue public safety announcements and general safety messages. If you have an event at your station or in your district, a public safety message, or any other idea for a post or a tweet, send it to me, with photos attached. We are in the developmental stages of this project, so I must approve all posts and uploads prior to them being released. Eventually, management of the sites will be turned over to a team of individuals who are responsible for posting and keeping the sites current and relevant. So like us on Facebook, follow us on Twitter and be patient as we catch up with the 21st century. We'll get there.



Staying Alive By BC David Stapp, Medical Operations

On May 22, 2013, AMR sponsored a *World CPR Challenge* where each of their operations worldwide identified and executed CPR training events within their communities. AMR Arlington and AFD joined forces at the Rangers Ballpark and collectively taught 2,250 individuals how to perform hands only "CPR." In Texas, approximately 5,000 learned this life saving skill with an additional 31,000 trained in communities throughout the world where AMR does business.



The American Heart Association endorses and teaches the two step process for "Staying Alive" with a short training video at: http://www.heart.org/HEARTORG/CPRAndECC/HandsOnlyCPR/Hands-Only-CPR_UCM_440559_SubHomePage.jsp. Please share this link with your friends and family; it is fast, it is easy and it saves lives.



Memorial

Honor Guard members FF Bryan Friend and LT Chris Balough recently attended the memorial service for the nineteen members of the Granite Mountain Hotshots, part of the Prescott Fire Department, who lost their lives Sunday, June 30th, while battling the 8,400 acre Yarnell Hill wildland fire. Arlington was proud to be represented along with firefighters from just down the road and as far away as Canada. Also, the memorial pipe band played on the town square the night prior to the memorial service.



Chief Crowson and AFD Command Staff visited with retired AO Mike Defratus while he is recuperating from an illness

Congratulations



Steve Lemming, husband of Sheri Lemming (Dispatch), graduated from Western Illinois University. Steve was named the Cecile A. Christison Sterrett College Scholar for Spring 2013. Steve is currently a Lieutenant with the Azle Fire Department. Way to go Steve!



Daniel Petrovich, eldest son of Rosa Petrovich (FP), and Marci Major exchanged wedding vows on May 25, 2013, in St. Louis, MI. Pictured are Marci, Daniel, Rosa, and Rosa's husband Toni.

Gone Fishing



Barbara Fischer (OEM) caught this King Salmon while fishing with her family at Lake Michigan. GO PACK GO!

National Take Your Dog to Work Day



Friday, June 21st was National Take Your Dog to Work Day, 8-year old rescued Cocker Spaniel, Bear (aka Antonio Bandanas) accompanied his dog-daddy, Chief Joe Morris, to the Arlington Fire Department Training Center. Bear quickly became the official Greeter/Ambassador and was put through his paces doing daily P.T. (Physical Training) and then did a once-over on the fire engines before they left on calls. Back at the office, Bear was worn out from his day at the job and was found taking a snooze under his owner's desk. All he lacked were the spots of a Dalmation, but Bear made up for it with unbridled enthusiasm in being a Firefighter Dog for a Day today.

Deaths

Helen Robertson, mother of FF John Robertson (8B) passed away peacefully on Friday, April 26, 2013. Funeral services were held at Moore Funeral Home, Arlington, Texas.

Retiree Clyde Truex passed away on Sunday, June 3, 2013. Services were held Moore Funeral Home, Arlington, Texas.

Graveside services for Retiree Bill Creek and his wife Fay, were held at the Vos Cemetery Pavillion, Coleman County.

Mary Jim Slagle, mother of AO Keith Slagle (13-C), passed away Monday, July 1, 2013. A memorial service was held at Methodist Community Church in Petty, Texas.

Lori Criss, daughter of Retired Dispatcher Mary Keith, passed away on Sunday, July 14, 2013. A memorial service was held at First Baptist church, 209 N Pine Street, Roanoke, Texas.



Get Well Wishes

Retired AO Rick Mahan was admitted into Suite 206 at USMD Arlington for flu like symptoms. He is not allowed any visitors.

Retirements

After 31 years with the Arlington Fire Department, FF Norm Phillips (10-A) retired on May 24, 2013.

Births

Hans Helgesen (FRM) and his wife, Susan, welcome their son, **Gunnar Helgesen**. Gunnar was born Tuesday, April 30, 2013, at 5:06 a.m. Gunnar weighed 6 lbs. and 13 oz. and measured 19 ¼ inches long.

AO Mike Minder (08-A) and his wife Rebecca, welcome their baby girl, **Olivia Annelise**. Olivia was born on Saturday, May 11, 2013. She weighed 7.7 lbs and measured 20.5" long.

AO Sam Kazen and his wife Robin, welcome their baby boy, **Carson**. Carson was born on Friday, May 3, 2013. Carson weighed 9 lbs., 12 oz., and measured 21.5" long.

P-FF Patrick Kirkpatrick (05-C) and his wife Amber, gave birth of their daughter, **Lillian Shea Kirkpatrick**. Lillian was born Thursday, May 16, 2013. She weighed 6 lbs., 8 oz. and measured 19" long.

FF Jeremy Snow (08-B) and wife Lauren and big brother Cason, welcomed baby **Cassie Addison Snow** on Thursday, May 16, 2013, at 08:05 a.m. Cassie weighed 9 lbs. 14 oz and measured 21 inches long.

P-FF Henry Walker (14-A) and his wife welcome their daughter, **Aubree Grace Walker**. Aubree was born on Friday, May 17, 2013. She weighed 7 lbs. 1 oz., and measured 19 inches long.

AC David Carroll and his wife LaDonna are grandparents (again). **Mayer Burton Johnson** was born on Saturday, June 22, 2013. Mayer weighed 6 lbs., 2 oz. Proud parents are Rebekah (daughter of Chief Carroll) and her husband Adam. Mayer has a big brother named Hendricks.

FF Brad Powell (09-B) and his wife Katie, welcome their son, **Bowen Powell**. Bowen was born Thursday, June 27, 2013. He weighed 7 lbs., 8 oz. and measures 20.25" long.

P-FF Matt Philson (09-B) and his wife Krystal, gave birth to their son, **Rhett Christian Philson**. Rhett was born Monday, July 8, 2013. He weighed 6 lbs., 11 oz.

P-FF Monty Stayner (15-A) and his wife Ashley welcome their daughter, **Brooklyn Rea Stayner**. Brooklyn was born yesterday, Monday, July 8, 2013. She weighed 6 lbs., 15 oz. and measured 19 inches long.

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